## **EXHIBIT A** REVISED FIRE PROOF OF CLAIM FORM

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#### UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF CALIFORNIA SAN FRANCISCO DIVISION

In re:

PG&E Corporation, and
Pacific Gas and Electric Company,
Debtors.

Chapter 11
Case No. 19-30088 (DM)
Jointly Administered

### Proof of Claim (Fire Claim Related)

Read the instructions before filing this claim form. This form is for tort claimants who have a claim against the Debtors (i.e. PG&E Corporation and Pacific Gas and Electric Company) that arose prior to the Debtors filing for bankruptcy (i.e. prior to January 29, 2019) and that arose from, or relates to, a fire. Do not use this form for non-fire claims. Non-fire tort claimants should use Form 410.

Do NOT file a fraudulent claim. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Please type or print in the spaces below. Do NOT use red ink or pencil.

. Who is the current creditor?	Name of the current creditor (the person or entity to be paid for this claim)				
2. Has this claim been acquired from someone else?	□ No □ Yes. Fro	m whom?			
3. Are you filing on behalf of your family?  A family is a group of two or more people related by birth, marriage, domestic partnership, or adoption and residing together. All such people are considered as members of one family.	☐ Yes ☐ No If you checked "Yes", please provide the		e full name of each family member that you are filing on behalf of:		
Where should notices and payments to the	Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different		
creditor be sent?	Name		Name		
Federal Rule of	Attorney Name (if applicable)				
Bankruptcy Procedure	Attorney Bar Number (if applicable)		Attorney Bar Number (if applicable)		
(FRBP) 2002(g)	Street Address		Street Address		
	City		City		
	State		State		
	Zip Code		Zip Code		
	Phone Number		Phone Number		
	Email Address		Email Address		
. Does this claim amend one already filed?	☐ No ☐ Yes. Cla	im number on court claims registry (if kn	own) Filed on		
. Do you know if anyone else has filed a proof of claim for this claim?	☐ No ☐ Yes. Wh	o made the earlier filing			

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Part 2: Give Informat	ion About the Claim as of the Date the Case Was Filed	
7. What fire is the basis of your claim? Check all that apply.	□ Camp Fire (2018) □ North Bay Fires (2017) □ Ghost Ship Fire (2016) □ Butte Fire (2015) □ Other (please provide date and brief description of fire):	
8. What are the loss location(s) where you and/or your family suffered harm? (e.g. home or business address, place of injury, place from which you were evacuated, if different).	Location(s):	
9. How were you and/or your family harmed? Check all that apply.	□ Property Damage (homes, structures, personal property, land, trees, landscaping, and all other property damage) □ Owner □ Renter □ Occupant □ Other (Please specify): □ Personal Injury □ Wrongful Death (If checked, please provide the name of the deceased: □ Business Loss/Interruption □ Lost wages and earning capacity □ Loss of community and essential services □ Agricultural loss □ Other (Please specify)	
10. What damages are you and/or your family claiming/seeking?	<ul> <li>Economic damages (including replacement cost of damaged property, diminution in value, loss of use, lost inventory, log profits, and other economic damage)</li> <li>Non-economic damages (including loss of society and support, loss of consortium, pain and suffering, emotional distress annoyance and discomfort, and other non-economic damage)</li> <li>Punitive, exemplary, and statutory damages</li> <li>Attorney's fees and litigation costs</li> <li>Interest</li> <li>Any and all other damages recoverable under California law</li> <li>Other (Please specify)</li> </ul>	
11. How much is the claim?	☐ To be determined in an amount according to proof or \$	

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Sign Below

The person completing	Check the appropriate box:					
this proof of claim must sign and date it.	☐ I am the creditor.					
FRBP 9011(b).	☐ I am the creditor	's attorney or authorized agent.				
If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
specifying what a signature is.	I declare under penalty of perjury that the foregoing is true and correct.					
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	Executed on date	MM / DD / YYYY				
years, or both.	Signature					
18 U.S.C. §§ 152, 157, and 3571.	Print the name of the person who is completing and signing this claim:					
	Name	=:				
		First Name	Middle Name	Last Name		
	Title					
	Company Identify the corporate servicer as the company if the authorized agent is a servicer					
	Address	Number	Street			
		City	State	ZIP Code		
	Contact phone		Email			

# Instructions for Proof of Claim (Fire Claim Related)

United States Bankruptcy Court

You may have a claim against the Debtors for monetary loss, personal injury (including death), or other asserted damages arising out of or related to a fire. You should consider obtaining the advice of an attorney, especially if you are unfamiliar with the bankruptcy process and privacy regulations.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.

18 U.S.C. §§ 152, 157 and 3571.

#### How to fill out this form:

- Fill in all of the information about the claim as of the date this claim form is filed.
- If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.
- For a minor child, fill in only the child's initials and the full name of the child's parent or guardian. For example, write *A.B.*, a minor child (John Doe, parent). See Bankruptcy Rule 9037.
- You are not required to attach supporting documents to this form. Many communities suffered significant, if not complete, ruin and destruction. Also, many individual claimants are displaced, lack the means for electronic and comprehensive communications and continue to have urgent priorities that make documentation requirements difficult and impractical. It is understood that supporting documents for many claimants have been destroyed or lost in the fires and that the reconstruction and retrieval process is slow or even underway. Supporting documents shall be gathered, maintained and provided at a later date as instructed by the Court.
- Question 2. Members of a family are not required to file a proof of claim as a family but can submit individual claim forms for each family member that has a tort claim against the debtors.
- Question 8. If you suffered property damage, then provide the street address of each real property parcel where you suffered property damage. If you were personally evacuated as the result of a fire, then provide the address or intersection closest to where you encountered the fire and began evacuation. If you suffered property damage and were evacuated from a different location, include both. If you were a renter, provide the address of your residence.
- Question 9. This question requests general statements of underlying facts relating to harm and is not intended to

Question 11. You are not required to include a claim amount with your proof of claim. Providing a claim amount at this time is optional.

#### Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You may view a list of filed claims in this case by visiting the Claims and Noticing Agent's website at http://restructuring.primeclerk.com/pge.

#### Understand the terms used in this form

**Claim:** A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

**Creditor:** A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).

**Debtor:** PG&E Corporation and Pacific Gas & Electric Company.

Information that is entitled to privacy: A *Proof of Claim* form must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

**Proof of Claim:** A form that shows the creditor has a tort claim against the debtors on or before the date of the bankruptcy filing. The form must be filed in the district where the case is pending.

**Redaction of information:** Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to **privacy** on the *Proof of Claim* form and any attached documents.

#### Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

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#### Please send completed Proof(s) of Claim to:

#### If by first class mail:

PG&E Corporation Claims Processing Center c/o Prime Clerk LLC Grand Central Station, PO Box 4850 New York, NY 10163-4850

#### If by overnight courier or hand delivery:

PG&E Corporation Claims Processing Center c/o Prime Clerk LLC 850 Third Avenue, Suite 412 Brooklyn, NY 11232

You may also hand deliver your completed Proof(s) of Claim to any of the following service center offices (during the hours of 8:30 a.m. – 5:00 p.m. Pacific Time):

Chico Service Center 350 Salem Street Chico, CA 95928

Marysville Service Center 231 "D" Street Marysville, CA 95901

Napa Service Center 1850 Soscol Ave. Ste 105 Napa, CA 94559

Oroville Service Center 1567 Huntoon Street Oroville, CA 95965

Redding Service Center 3600 Meadow View Road Redding, CA 96002

Santa Rosa Service Center 111 Stony Circle Santa Rosa, CA 95401

Photocopy machines will not be available at the Claim Service Centers; you must bring a copy of your claim if you wish to receive a date-stamped conformed copy.

Do not file these instructions with your form.

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Do NOT file a fraudulent claim. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Please type or print in the spaces below. Do NOT use red ink or pencil.

Part 1: Identify the Claim 1. Who is the current creditor? Name of the current creditor (the person or entity to be paid for this claim) Has this claim been acquired from Yes. From whom? someone else? Are you filing on If you checked "Yes", please provide the full name of each family member that you are filing on behalf of: Yes behalf of your family? ☐ No A family is a group of two or more people related by birth, marriage, domestic partnership, or adoption and residing together. All such people are considered as members of one family. Where should Where should notices to the creditor be sent? Where should payments to the creditor be sent? (if different) notices and payments to the creditor be sent? Name Name Attorney Name (if applicable) \_\_\_\_\_ Attorney Name (if applicable) \_\_\_\_ Federal Rule of Attorney Bar Number (if applicable) Attorney Bar Number (if applicable) **Bankruptcy Procedure** (FRBP) 2002(g) Street Address Street Address \_\_\_\_\_ City \_\_ \_\_\_\_\_\_ State \_\_\_ State \_\_\_\_\_ Zip Code \_\_\_ Zip Code Phone Number \_\_\_\_ \_\_\_\_\_ Phone Number \_\_\_ Email Address Email Address \_\_\_ ☐ No Does this claim amend one already ☐ Yes. Claim number on court claims registry (if known) filed? / YYYY MM / DD No No Do you know if anyone else has filed a proof of Yes. Who made the earlier filing claim for this claim?

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Part 2: Give Information	About the Claim as of the Date the Case Was Filed	
5.7. What fire is the basis of your claim? Check all that apply.	Camp Fire (2018) North Bay Fires (2017) Ghost Ship Fire (2016) Butte Fire (2015) Other (please provide date and brief description of fire):	_
6.8. What are the loss location(s) where you and/or your family suffered harm? (e.g. home or business address, place of injury, place from which you were evacuated, if different).	Location(s):	
7.9. How were you and/or your family harmed? Check all that apply.	Property Damage (homes, structures, personal property, land, trees, landscaping, and all other property damage)  Owner Renter Occupant Other (Please specify):  Personal Injury Wrongful Death (If checked, please provide the name of the deceased: Business Loss/Interruption Lost wages and earning capacity Loss of community and essential services Agricultural loss Other (Please specify)	
8.—10. What damages are you and/or your family claiming/seeking?	<ul> <li>Economic damages (including replacement cost of damaged property, diminution in value, loss of use, lost inventor profits, and other economic damage)</li> <li>Non-economic damages (including loss of society and support, loss of consortium, pain and suffering, emotional disannoyance and discomfort, and other non-economic damage)</li> <li>Punitive, exemplary, and statutory damages</li> <li>Attorney's fees and litigation costs</li> <li>Interest</li> <li>Any and all other damages recoverable under California law</li> <li>Other (Please specify)</li> </ul>	•
9 <u>-11.</u> How much is the claim?	☐ To be determined in an amount according to proof or \$ (options)	<u>al)</u>
The person completing this proof of claim must sign and date it. FRBP 9011(b).  If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying		
what a signature is.  A person who files a fraudulent claim could be \$5500,000, d Signipidio 5/	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.  I declare under penalty of perjury that the foregoing is true and correct.	
18 U.S.C. §§ 152, 157, and 3571.	Executed on date	
Case: 19-30	089natur Doc# 2747-1 Filed: 06/25/19 Entered: 06/25/19 11:02:07 Page 8 Print the name of the person who is completing and signing this claim:	

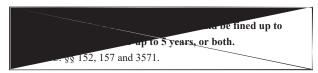
Name						_	
	First Name	Middle Name		Last Name			
Title						_	
Company	Identify the cornerate s	servicer as the company if th	a authorized ag	ont is a sorvicer		_	
	identity the corporate s	servicer as the company in the	ie autilolized ag	ent is a servicer			
Address	Number	Street				_	
	City	State		ZIP Code		-	
Contact phone			Email				
		City			State	ZIP Code	
	Contact p	hone _			Email	-	

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Question 11. You are not required to include a claim amount with your proof of claim. Providing a claim amount at this time is optional.

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c/o Prime Clerk LLC

Grand Central Station, PO Box 4850

New York, NY 10163-4850

850 3rd

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850 Third Avenue, Suite 412

Brooklyn, NY 11232

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350 Salem Street

Chico, CA 95928

Marysville Service Center

231 "D" Street

Marysville, CA 95901

Napa Service Center

1850 Soscol Ave. Ste 105

Napa, CA 94559

Oroville Service Center

1567 Huntoon Street

Oroville, CA 95965

Redding Service Center

3600 Meadow View Road

Redding, CA 96002

Santa Rosa Service Center

111 Stony Circle

Santa Rosa, CA 95401

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